

HOPE HEALTH AND REHABILITATION CENTER

438 ASHFORD AVENUE, P.O. BOX 280

LOMIRA 53048 Phone: (920) 269-4386

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/02): 42

Total Licensed Bed Capacity (12/31/02): 42

Number of Residents on 12/31/02: 38

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Corporation

Skilled

No

Yes

Yes

39

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%		Less Than 1 Year		47.4
Supp. Home Care-Personal Care	No	-----	-----	-----	-----		1 - 4 Years		36.8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	5.3		More Than 4 Years		15.8
Day Services	No	Mental Illness (Org./Psy)	39.5	65 - 74	5.3				-----
Respite Care	No	Mental Illness (Other)	2.6	75 - 84	28.9				100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	55.3		*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	5.3		Full-Time Equivalent		
Congregate Meals	Yes	Cancer	2.6		-----		Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0		(12/31/02)		
Other Meals	No	Cardiovascular	18.4	65 & Over	94.7		-----		
Transportation	No	Cerebrovascular	23.7		-----		RNs		6.3
Referral Service	No	Diabetes	2.6	Sex	%		LPNs		3.4
Other Services	Yes	Respiratory	5.3	-----	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	5.3	Male	21.1		Aides, & Orderlies		40.5
Mentally Ill	No		-----	Female	78.9				
Provide Day Programming for			100.0		-----				
Developmentally Disabled	No				100.0				

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total Resi- dents	% Of All
	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	4	100.0	303	16	88.9	115	0	0.0	0	16	100.0	136	0	0.0	0	0	0.0	0	36	94.7
Intermediate	---	---	---	2	11.1	96	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	5.3
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0		18	100.0		0	0.0		16	100.0		0	0.0		0	0.0		38	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02				

		% Needing				Total
Percent Admissions from:		Activities of	%	Assistance of	% Totally	Number of
Private Home/No Home Health	13.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	4.3	Bathing	13.2	13.2	73.7	38
Other Nursing Homes	4.3	Dressing	13.2	13.2	73.7	38
Acute Care Hospitals	76.1	Transferring	15.8	10.5	73.7	38
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	15.8	10.5	73.7	38
Rehabilitation Hospitals	0.0	Eating	68.4	0.0	31.6	38
Other Locations	2.2	*****				
Total Number of Admissions	46	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	7.9		Receiving Respiratory Care	0.0
Private Home/No Home Health	31.1	Occ/Freq. Incontinent of Bladder	65.8		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	13.3	Occ/Freq. Incontinent of Bowel	63.2		Receiving Suctioning	0.0
Other Nursing Homes	2.2				Receiving Ostomy Care	2.6
Acute Care Hospitals	0.0	Mobility			Receiving Tube Feeding	0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	23.7
Rehabilitation Hospitals	0.0					
Other Locations	2.2	Skin Care			Other Resident Characteristics	
Deaths	51.1	With Pressure Sores	2.6		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	0.0		Medications	
(Including Deaths)	45				Receiving Psychoactive Drugs	42.1

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility	Ownership: Proprietary		Bed Size: Under 50		Licensure: Skilled		All Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.9	85.1	1.09	84.2	1.10	86.7	1.07	85.1	1.09
Current Residents from In-County	57.9	75.4	0.77	68.6	0.84	69.3	0.84	76.6	0.76
Admissions from In-County, Still Residing	21.7	20.1	1.08	21.5	1.01	22.5	0.97	20.3	1.07
Admissions/Average Daily Census	117.9	138.3	0.85	123.5	0.96	102.9	1.15	133.4	0.88
Discharges/Average Daily Census	115.4	139.7	0.83	128.3	0.90	105.2	1.10	135.3	0.85
Discharges To Private Residence/Average Daily Census	51.3	57.6	0.89	35.5	1.44	40.9	1.25	56.6	0.91
Residents Receiving Skilled Care	94.7	94.3	1.00	78.6	1.21	91.6	1.03	86.3	1.10
Residents Aged 65 and Older	94.7	95.0	1.00	91.8	1.03	93.6	1.01	87.7	1.08
Title 19 (Medicaid) Funded Residents	47.4	64.9	0.73	52.2	0.91	69.0	0.69	67.5	0.70
Private Pay Funded Residents	42.1	20.4	2.06	39.0	1.08	21.2	1.98	21.0	2.00
Developmentally Disabled Residents	0.0	0.8	0.00	0.6	0.00	0.6	0.00	7.1	0.00
Mentally Ill Residents	42.1	30.3	1.39	35.8	1.17	37.8	1.11	33.3	1.26
General Medical Service Residents	5.3	23.6	0.22	11.9	0.44	22.3	0.24	20.5	0.26
Impaired ADL (Mean)	70.5	48.6	1.45	56.7	1.24	47.5	1.48	49.3	1.43
Psychological Problems	42.1	55.2	0.76	52.8	0.80	56.9	0.74	54.0	0.78
Nursing Care Required (Mean)	3.6	6.6	0.55	5.6	0.65	6.8	0.53	7.2	0.50